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CONFIRMATION NO. 1877

<b>SERIAL NUMBER</b> 10/775,640	<b>FILING OR 371(c) DATE</b> 02/10/2004 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> DX0763XB1
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## APPLICANTS

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EPA

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a DIV of 10/191,732 07/08/2002 PAT 6,953,843 which is a DIV of 09/127,946 07/31/1998 PAT 6,416,973  
 which claims benefit of 60/089,168 06/12/1998  
 and claims benefit of 60/069,639 12/15/1997  
 and claims benefit of 60/063,717 10/29/1997  
 and claims benefit of 60/069,692 12/16/1997  
 and claims benefit of 60/054,430 08/01/1997

EPA

## \*\* FOREIGN APPLICATIONS \*\*\*\*\* none

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/30/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <i>John D. O'Hare</i> Initials: <i>EPA</i>	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
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**ADDRESS**  
 28008

## TITLE

Mammalian cell membrane proteins; related reagents

<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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